

GRANT SELF-ASSESSMENT CHECKLIST

The following Grant Self-Assessment Checklist is a required document to be submitted with Grantee's Final Report.

Prior to starting work on this Grant, the CIWMB requests that the Grantee's Primary Contact and authorized grant Signature Authority review the following Checklist.

The purpose of this checklist is twofold:

- 1) to alert Grant Managers and Signature Authorities at the beginning of the grant to key grant administrative management requirements; and
- 2) to provide a tool at the end of the grant to aid the Grantee and CIWMB to measure compliance with grant administrative requirements.

What grant amount was the Grantee awarded:

☐ Less than \$10,000 ☐ Between \$10,000 and \$100,000 ☐ Over \$100,000?

#	Question	Yes	Some what	No	N/A
1.	Did Grantee's Grant Manager read the following documents prior to starting the grant project: <ul style="list-style-type: none"> Procedures and Requirements Terms and Conditions 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2.	Did the Signature Authority read the following documents prior to starting the grant project: <ul style="list-style-type: none"> Procedures and Requirements Terms and Conditions 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3.	Were the following documents sent to the Grantee's administrative/fiscal staff? <ul style="list-style-type: none"> Procedures and Requirements Terms and Conditions 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4.	Does the Grant agreement reflect the date the Grantee's Signature Authority signed the Grant Agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Did Grantee's Signature Authority sign the Grant Agreement prior to the start date of the grant term shown on the Grant Agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Was the grant project performed in accordance with the Work Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Did the CIWMB Grant Manager approve, in writing, changes to the following? <ul style="list-style-type: none"> Work Plan Budget 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8.	Were all reports (progress and final) submitted in the following? <ul style="list-style-type: none"> timely in accordance with the Procedures and Requirements 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
9.	Were all grant Payment Requests signed by the authorized Signatory Authority or his/her authorized designee?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Was a separate grant fund account established for this grant? <ul style="list-style-type: none"> If yes, and if during this grant period Grantee had another open CIWMB grant, did each grant and/or grant cycle have its own sub account? 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

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11.	Were any grant expenditures, incurred prior to the issuance of the Notice to Proceed, authorized for payment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Did Grantee receive reimbursement for any goods and/or services <ul style="list-style-type: none"> prior to the goods and/or services being received/rendered? prior to Grantee's payment of these items? 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
13.	If Grantee claimed personnel costs/labor hours, are all time sheets and payroll registers/records available in the grant file to substantiate grant reimbursement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	If Grantee claimed indirect or overhead costs, does the Grantee have an approved cost allocation plan available for review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	If claimed, were indirect or overhead costs <ul style="list-style-type: none"> limited to the percentage allowed in the grant? exempt from limit? 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
16.	Can the expended grant funds <ul style="list-style-type: none"> be traced to the general ledger? are these funds substantiated with verifiable documentation? 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
17.	Did the Grantee have written agreements with all (sub)contractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Did Grantee provide all (sub)contractors with the Terms and Conditions and Procedures and Requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Are any grant costs also payable under another CIWMB loan, grant, and/or contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Did the Grantee claim any out-of-state travel costs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	If Grantee claimed any per diem costs were they limited to the amounts authorized in the Department of Personnel Administration website? See http://www.dpa.ca.gov/personnel-policies/travel/employees.htm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Did Grantee purchase or lease equipment, land, and/or buildings with grant funds (circle applicable category(ies))?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Did Grantee claim for reimbursement any costs incurred after the end of the grant term?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	(Answer only if grant funds were advanced.) Were grant funds deposited and maintained in an FDIC insured interest bearing account until expended?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	(Answer only if grant funds were advanced.) Did Grantee account for all interest earned on grant funds?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26.	Please identify which of the following documents are in the Grant file or readily available in the event of an audit:				
	a. Grant Agreement including cover sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Procedures and Requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Terms and Conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Notice to Proceed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	e. All grant amendments (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Payroll Journal/Registers with supporting employee timesheets and fringe benefit calculations (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	g. All source documents for Fringe Benefit Expenditures, i.e., documentation detailing/supporting rate calculations (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	h. General Ledger for grant account(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	i. A list of all vendors and/or (sub)contractors who have received grant funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	j. All supporting documents for reimbursed expenditures, e.g., vendor and/or (sub)contractor invoices, cancelled checks, bank statements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	k. All Grant Payment Requests with supporting documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	l. All Grant Progress Reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	m. A Cash Disbursement Ledger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	n. A Cash Receipts Ledger (Revenue Register) and supporting records (e.g., copies of deposit slips) identifying receipt of funds from CIWMB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	o. All grant related correspondence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	p. Internal Control documents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	q. Organization Chart with identification of grant personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	r. Written internal procedures and flowcharts for receipts and deposits, disbursements, and expenditure itemization summary preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	s. Independent Auditor's Report, e.g., Single Audit Report, for fiscal year(s) during the grant period (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	t. IRS approval for Not for Profit and Articles of Incorporation (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GRANTEE CONTACT INFORMATION

GRANTEE NAME:

GRANT PROGRAM AND NUMBER:

SELF-ASSESSMENT CONDUCTED BY:
NAME (FIRST AND LAST):

TITLE:

TELEPHONE NUMBER:

Certification: I declare, under penalty of perjury under the laws of the State of California that all information provided in the above Assessment is true and accurate to the best of my knowledge.

Grant Signature Authority

Date